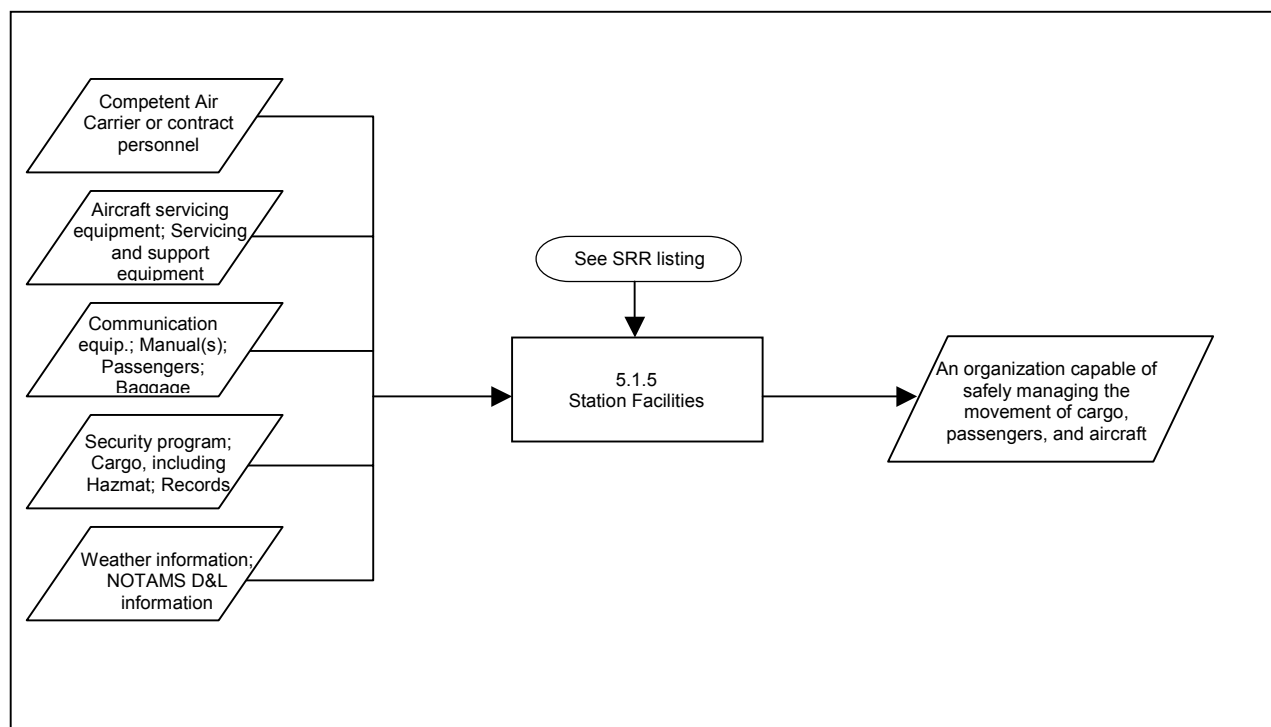


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ELEMENT SUMMARY INFORMATION

Element: 5.1.5 Station Facilities

Purpose of this Element (Air Carrier's responsibility):

To handle aircraft, cargo, and passengers in a safe and reliable manner.

Objective (FAA responsibility):

To determine if the air carrier's station facilities process includes safety attributes.

Inputs:

- Competent Air Carrier or Contract ground personnel
- Aircraft Servicing Equipment
- Servicing and Support Equipment (e.g. Aircraft, Passengers, and Cargo)
- Communication Equipment
- Manual(s) (System 2.0)
- Passengers
- Baggage
- Security Program
- Cargo, Including Hazmat
- Records
- Weather Information
- NOTAMS D and L Information

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Output:

- An organization capable of safely managing the movement of cargo, passengers and aircraft

Performance Measure:

- All cargo, passengers, and aircraft are always moved safely through the facility.

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SRR:

- 119.43 (c) Certificate holder's duty to maintain operations specifications
- 121.93 (a)(2) Route requirements: General
- 121.105 Approval of routes: Domestic and flag operations: Servicing and maintenance facilities
- 121.123 Approval of areas and routes for supplemental operations: Servicing maintenance facilities
- 121.135 (b) Manual Requirements: Contents
- 121.137 (a) Manual Requirements: Distribution and availability

Other CFRs and/or FAA Guidance:

- 14 CFR Part 108 Airplane Operator Security
- 14 CFR Part 109 Indirect Air Carrier Security
- 8300.10, vol. 2, Chapter 61, sect. 1, paragraph 7 "Evaluate FAR Part 121/135.411(a)(2) Operator"
- 8300.10, vol. 2, Chapter 61, sect. 1, paragraph 11 "Evaluate FAR Part 121/135.411(a)(2) Operator"
- 8400.10, vol. 2, Chapter 2, sect. 1, paragraph 73 "Issue SFAR 36 Authorization"
- 8400.10, vol. 3, Chapter 9, sect. 5, paragraph 1625 (Reserved)
- 8400.10, vol. 2, Chapter 2, sect. 19, paragraph 467 "Issue SFAR 36 Authorization"
- 8400.10, vol. 2, Chapter 2, sect. 19, paragraph 467-475 "Issue SFAR 36 Authorization"
- 8400.10, vol. 3, Chapter 15, sect. 3, paragraph 2147 (Reserved)
- AC 120-49, paragraph 5 and 8 "Certification of Air Carriers"

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SRR SPECIFIC INFORMATION

SRR	Intent	Inspectors
119.43 (c)	To inform persons used in the Air Carrier's operations of their duties and responsibilities as outlined in its Operations Specifications.	<i>Certification: ASI</i> <i>Surveillance: ASI</i>
121.93 (a)(2)	To require the certificate holder to show that it has adequate facilities and services available for its proposed operations.	<i>Certification: ASI</i>
121.105	To ensure that domestic and flag Air Carriers have competent personnel, adequate facilities, equipment and materials available for servicing and maintenance of aircraft and equipment.	<i>Certification: ASI</i> <i>Surveillance: ASI</i>
121.123	To ensure that supplemental Air Carriers have competent personnel, adequate facilities, equipment and materials available for servicing and maintenance of aircraft and equipment.	<i>Certification: ASI</i> <i>Surveillance: ASI</i>
121.135 (b)	To require Manuals to contain specific information that is applicable for stations personnel.	<i>Certification: ASI</i> <i>Surveillance: ASI</i>
121.137 (a)	To require that an Air Carrier provide Manuals to its employees and the FAA	<i>Certification: ASI</i> <i>Surveillance: ASI</i>

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5.1.5 Station Facilities

SECTION 1 - RESPONSIBILITY ATTRIBUTE

Objective: To determine if there is a clearly identifiable, qualified, and knowledgeable person who is accountable for the quality of the station facilities process.

To meet this objective, the inspector will accomplish the following tasks:

1. Identify the person who is responsible for the quality of the Station Facilities process.
2. Review the description in the Manual that delineates the duties and responsibilities of the person.
3. Evaluate the person's qualifications and work experience (or resume', if appropriate).
4. Review the appropriate organizational chart.
5. Discuss the Station Facilities process with the person.

To meet this objective, the inspector will determine and record answers to the following questions:

1. Is there a clearly identifiable person who is answerable for the quality of the Station Facilities process?	<input type="checkbox"/> YES If yes, provide the name: <input type="checkbox"/> NO If no, explain:
2. Does the person understand the procedures associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
3. Does the person understand the controls associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
4. Does the person understand the interfaces associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
5. Does the person understand the process measurements associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
6. Is the responsibility of this position clearly documented in the air carrier's Manual(s)?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
7. Are the qualification standards for this position clearly documented?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
7a Are the qualification standards for this position appropriate for the duties that are assigned?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
8. Does the person meet the qualification standards?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
9. Does the person acknowledge that he/she has responsibility for the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
10. Does the person know who has authority to establish and modify the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO

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5.1.5 Station Facilities

SECTION 2 – AUTHORITY ATTRIBUTE

Objective: To determine if there is a clearly identifiable, qualified, and knowledgeable person with the authority to establish and modify the station facilities process.

To meet this objective, the inspector will accomplish the following tasks:

1. Identify the person who has the authority to establish or modify the Station Facilities process.
2. Review the description in the Manual that delineates the duties and responsibilities of the person.
3. Evaluate the person's qualifications and work experience (or resume', if appropriate).
4. Review the appropriate organizational chart.
5. Discuss the Station Facilities process with the person.

To meet this objective, the inspector will determine and record answers to the following questions:

1. Is there a clearly identifiable person who has authority to establish and modify the air carrier's policies for the Station Facilities process?	<input type="checkbox"/> YES If yes, provide the name: <input type="checkbox"/> NO If no, explain:
2. Does the person understand the procedures associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
3. Does the person understand the controls associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
4. Does the person understand the interfaces associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
5. Does the person understand the process measurements associated with the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
6. Is the authority of this position clearly documented in the air carrier's Manual(s)?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
7. Are the qualification standards for this position clearly documented?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
7a Are the qualification standards for this position appropriate for the duties that are assigned?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
8. Does the person meet the qualification standards?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
9. Does the person acknowledge that he/she has authority for the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
10. Does the individual know who has the responsibility for the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
11. Are the procedures for delegation of authority clearly documented for the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO

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5.1.5 Station Facilities

SECTION 3 – PROCEDURES ATTRIBUTE

Objective: To determine if the air carrier has documented procedures for accomplishing the station facilities process.

To meet this objective, the inspector will accomplish the following tasks:

1. Review the documented instructions and information related to the Station Facilities process to ensure that they contain who, what, where, when, and how.
2. Review the FAA Guidance and Specific Regulatory Requirements (SRR) included in the supplemental information section of this SAI.
3. Discuss the Station Facilities process with appropriate personnel to gain an understanding of the procedures.
4. Observe the Station Facilities process to gain an understanding of the procedures.

To meet this objective, the inspector will determine and record answers to the following questions:

1. Do written procedures exist to achieve the desired result of the Station Facilities process:

1.1 Do written procedures spell out how to ensure the safe movement of cargo?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.2 Do written procedures spell out how to ensure the safe movement of passengers?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.3 Do written procedures spell out how to ensure the safe movement of aircraft?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.4 Do written procedures identify critical functions?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.5 Do written procedures spell out how to manage the Air Carrier's and contractors' personnel?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.6 Do written procedures spell out how to maintain station facilities?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.7 Do written procedures spell out how to maintain support equipment?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.8 Do written procedures address in detail the safe operation of support equipment?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A

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SECTION 3 – PROCEDURES ATTRIBUTE

1.9 Do written procedures address in detail maintenance of aircraft servicing equipment?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.10 Do written procedures address in detail the safe operation of aircraft servicing equipment?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.11 Do written procedures address in detail the maintenance of communication(s) equipment?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.12 Do written procedures direct the Air Carrier to operate communication equipment in accordance with its own policies and FCC regulations?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.13 Do written procedures require the Air Carrier to make Manuals available to station and contract personnel?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.14 Do written procedures address in detail the management of Air Carrier's carry-on baggage program?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.15 Do written procedures address in detail the management of positive pairing and identification of passengers and checked baggage?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.16 Do written procedures address in detail the management of the Air Carrier's security program?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.17 Do written procedures address in detail the management of the Air Carrier's hazmat program?[121.135(b)]	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.18 Do written procedures require the Air Carrier to create and maintain the station records required by FAR 121, Subpart V?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.19 Do written procedures exist to support the operational release of aircraft? [Subsystem 3.2]	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.20 Do written procedures address the Air Carrier's control of the movement and placement of personnel and equipment in support of aircraft (i.e., a marshalling plan)?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.21 Does the Air Carrier have written procedures to initiate its emergency response plan?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A

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5.1.5 Station Facilities

SECTION 3 – PROCEDURES ATTRIBUTE

1.22 Do written procedures require the Air Carrier to identify and correct ramp area deficiencies (e.g., signage, markings, lighting, blast fences, etc.)?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.23 Do written procedures expressly limit duty periods and mandate rest requirements for ground personnel?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2. Do the procedures identify: who, what, where, when and how?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
3. Are the procedures in compliance with the CFR(s)?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
4. Do the procedures conform to other written guidance (E.g., Operations Specifications, FAA Orders, Airworthiness Directives, Advisory Circulars, Handbook Bulletins, Directives, and Manufacturer's Recommendations)?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
5. Does the air carrier have the resources to support the written procedures for the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
6. If alternate procedures exist for use during irregular conditions, do they achieve the same desired results as the primary procedures so that an equivalent level of safety is maintained? (E.g., a manual system used as a result of equipment failure).	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A, No alternate procedures exist for this element
7. Are the procedures published in different manuals relating to the Station Facilities process consistent?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
8. Does the air carrier have a documented method for assessing the impacts of procedural changes to the Station Facilities process?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO

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5.1.5 Station Facilities

SECTION 4 – CONTROL ATTRIBUTE

Objective: To determine if checks and restraints are designed into the station facilities process to ensure a desired result is achieved.

To meet this objective, the inspector will accomplish the following tasks:

1. Review the documented instructions and information related to the Station Facilities process.
2. Review the FAA Guidance and Specific Regulatory Requirements (SRR) included in the supplemental information section of this SAI
3. Discuss the Station Facilities process with appropriate personnel to gain an understanding of the controls.
4. Observe the Station Facilities process to gain an understanding of the controls.

To meet this objective, the inspector will determine and record answers to the following questions:

1. Are the following checks and restraints built into the Station Facilities process:

1.1 Does the Air Carrier provide on-site supervision of ground personnel?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.2 Does the Air Carrier provide direct supervision of ground personnel performing critical functions?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.3 Does the Air Carrier ensure that its fueling program is followed?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.4 Does the Air Carrier have a visual method to distinguish between journeymen and trainees?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.5 Does the Air Carrier provide supervision of trainees?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.6 Does the Air Carrier require all support/service equipment to be inspected periodically?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.7 Does the Air Carrier require supervisory personnel to periodically check currency and availability of manuals for use by stations and contract personnel? [System 2.0]	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
1.8 Does the Air Carrier require all carry-on bags to be tagged? [Element 3.1.5]	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A

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SECTION 4 – CONTROL ATTRIBUTE

1.9 Does the Air Carrier have a process that ensures a positive pairing of passengers and check baggage?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.10 Does the Air Carrier ensure that security is conducted in accordance with its FAA-approved Security Program?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.11 Does the Air Carrier ensure that HAZMAT operations are conducted in accordance with its FAA-approved HAZMAT program?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.12 Does the station manager have a method for ensuring that all required station records are maintained?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.13 Does the Air Carrier periodically review its operational release procedures to ensure that the flight crew receives all necessary support?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.14 Does the Air Carrier periodically review its marshalling plan to ensure that it safely supports aircraft ramp operations?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.15 Does the Air Carrier periodically review its emergency response plan?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.16 Does the station have follow-up procedures to ensure timely correction of reported ramp and aircraft movement area deficiencies?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1.17 Does the Air Carrier employ a scheduling system to ensure duty and rest procedures for ground personnel are followed?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no or N/A, explain:
1. Do the checks and restraints ensure the desired result is achieved for the Station Facilities process?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If no, explain:
2. Does the air carrier have a documented method for assessing the impacts of any changes made to checks and restraints in the Station Facilities process?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If no, explain:
3. Does the air carrier have the resources to support the checks and restraints for the Station Facilities process?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If no, explain:

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5.1.5 Station Facilities

SECTION 5 - PROCESS MEASUREMENT ATTRIBUTE

Objective: To determine if the air carrier measures and assesses its station facilities process to identify and correct problems or potential problems.

To meet this objective, the inspector will accomplish the following tasks:

1. Review the documented instructions and information related to the Station Facilities process.
2. Discuss the Station Facilities process with appropriate personnel to gain an understanding of the process measures.
3. Observe the Station Facilities process to gain an understanding of the process measures.

To meet this objective, the inspector will determine and record answers to the following questions:

1. <Deleted>	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
2. Does the air carrier's Station Facilities process include the following process measurements?	
2.1 Does the Air Carrier record instances in which it did not provide proper supervision?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.2 Does Air Carrier record instances in which its fueling program was not followed?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.3 Does the Air Carrier record instances in which its visual method of distinguishing between journeymen and trainees was not followed?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.4 Does the Air Carrier employ a preventive maintenance program for support and service equipment?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.5 Does the Air Carrier record instances in which its periodic inspection of support and service equipment was not accomplished?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.6 Does the Air Carrier record instances in which manuals used by stations and contract personnel were found to be either out of date or unavailable?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.7 Does the Air Carrier record the number of instances in which untagged carry-on baggage is discovered at a control point prior to boarding?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A
2.8 Does the Air Carrier record instances in which unpaired baggage was carried	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> NO <input type="checkbox"/> N/A

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SECTION 5 - PROCESS MEASUREMENT ATTRIBUTE

2.9 Does the Air Carrier record breaches in security?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.10 Does the Air Carrier record instances in which its FAA-approved HAZMAT program was not followed?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.11 Does the Air Carrier record instances in which required records were not available?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.12 Does the Air Carrier record instances in which flight crews did not receive necessary support?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.13 Does the Air Carrier record instances in which incidents or unsafe conditions occurred during ramp operations (marshalling plan)?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.14 Does the Air Carrier record errors which they have discovered during review of their emergency response plan?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.15 Does the Air Carrier record instances in which timely corrections to reported ramp and aircraft movement area deficiencies were not accomplished?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.16 Does the Air Carrier use an independent audit to ensure compliance with its duty and rest procedures?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.17 Does the Air Carrier record departure delays?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2.18 Does the Air Carrier analyze and evaluate the reasons for all departure delays?	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
3. Does the air carrier document their process measurement methods and results?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> No
4. Are the air carrier's process measurement methods effective?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> No
5. Does the air carrier use their process measurement results to improve their programs?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> No
6. Are the process measurement results accessible to the FAA?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> No

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SECTION 5 - PROCESS MEASUREMENT ATTRIBUTE

- | | |
|---|--|
| 7. Does the organization that conducts the process measurement have direct access to the person with responsibility for the Station Facilities process? | <input type="checkbox"/> YES If no, explain:
<input type="checkbox"/> NO |
| 8. Does the air carrier have the resources to support the process measurement for the Station Facilities process? | <input type="checkbox"/> YES If no, explain:
<input type="checkbox"/> NO |

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5.1.5 Station Facilities

SECTION 6 – INTERFACES ATTRIBUTE

Objective: To determine if the air carrier identifies and manages the interactions between the station facilities process and the other element processes within the air carrier organization.

To meet this objective, the inspector will accomplish the following tasks:

1. Review the documented instructions and information related to the Station Facilities process.
2. Discuss the Station Facilities process with appropriate personnel to gain an understanding of the interfaces.
3. Observe the Station Facilities process to gain an understanding of the interfaces.

To meet this objective, the inspector will determine and record answers to the following questions:

1. Are the following interfaces identified for the Station Facilities process:

1.1 Appropriate Operational Equipment (Element 1.1.2)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.2 De-icing Program (Element 1.3.8)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.3 Fueling (Element 1.3.16)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.4 Manual Currency (Element 2.1.1)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.5 Manual Availability (Element 2.1.4)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.6 Supplemental Operations Requirements (Element 2.1.5)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.7 Passenger Handling (Element 3.1.1)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.8 Operational Control (Element 3.1.4)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.9 Carry-on Baggage (Element 3.1.5)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A

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5.1.5 Station Facilities

SECTION 6 – INTERFACES ATTRIBUTE

1.10 Exit Seating (Element 3.1.6)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.11 De-icing Program (Element 3.1.7)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.12 Carriage of Cargo (Element 3.1.8)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.13 Other Approved Programs (Security Program)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.14 Dispatch or Flight Release (Element 3.2.1)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.15 Flight/Load Manifest/Weight and Balance Control (Element 3.2.2)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.16 Training of Stations Personnel (Element 4.2.6)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.17 Line Stations (Servicing and Maintenance) (Element 5.1.1)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.18 Weather Reporting Facilities (Element 5.1.2)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.19 Use of Approved Areas, Routes, and Airports (Element 5.1.6)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.20 Director of Safety (Element 7.1.3)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.21 Director of Operations (Element 7.1.4)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.22 Airport Manager	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A

Safety Attribute Inspection (SAI) Job Aid

5.1.5 Station Facilities

SECTION 6 – INTERFACES ATTRIBUTE

1.23 ATC	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.24 Airport Committees	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.25 Airport Fire and Rescue Service	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.26 Emergency Medical Service	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.27 Other Approved Programs (Drug and Alcohol Program)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.28 Content Consistency Across Manuals (Element 2.1.2)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.29 (Manual) Distribution (Element 2.1.3)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.30 HAZMAT/Dangerous Goods Program (Element 3.1.12)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
1.31 Safety Program (Element 7.2.1)	<input type="checkbox"/> YES If no or N/A, explain: <input type="checkbox"/> No <input type="checkbox"/> N/A
2. List any additional interfaces identified:	
3. Are there written procedures for the use of air carrier personnel in the application of these interfaces?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
4. Are there controls to ensure that interfaces occur?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO
5. Are the interfaces between the Station Facilities process and other processes treated consistently in the Manual(s)?	<input type="checkbox"/> YES If no, explain: <input type="checkbox"/> NO